## Foster Family Home - Corrective Action Report

Provider ID:

2-090073

Home Name:

Eredulin Julian, CNA

Review ID:

2-090073-10

15-3226 Hoopili Street

Reviewer:

Carol Copeland

Pahoa

HI 96778

Begin Date:

6/13/2019

**Foster Family Home** 

**Required Certificate** 

[11-800-6]

6.(d)(1)

Comply with all applicable requirements in this chapter; and

Comment:

Home inspection performed to recertify two client home. Home not in compliance on day of inspection. Corrective action plan issued with plan of correction due to CTA by 7/13/19.

**Foster Family Home** 

**Background Checks** 

[11-800-8]

8.(a)(1)

Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

8.(d)(2)(A)

A caregiver, substitute caregiver, or other adult residing in the community care foster family home, except for adults receiving care, has been convicted of a crime other than a minor traffic violation involving a fine of \$50 or less;

Comment:

8.(a)(1) No current Fieldprint in home binder for CG # 1. 8.(d)(2)(A) No current Fieldprint in home binder for HHM # 1.

Compliance Manager

De Manager

De Manager

Primary Care Giver

Date

6/14/2019

Date

6/27/2019 6:39 AM

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Community Care Foster Family Home (CCFFH) Written Plan of Correction for Deficiencies Listed in Corrective Action Report Chapter 17-1454

CCFFH Name:

EREDULIN JULIAN, CNA

CCFFH Address: 15-3226 HO'OPILI ST. PAHOA, HAWAII 96778

Rule Number	Corrective Action Taken	Date Corrected	Prevention Strategy	
8.(a)(1)	Caregiver went for fingerprint on June 7, 2019. Result of fingerprint was receive June 14, 2019.	June 14, 2019	Caregiver will renew fingerprint 3-4 weeks prior to expiration next time.	
8.(d)(2) (A)	HHM #1 went for fingerprint on June 20, 2019.	June 20, 2019	HHM # 1 move out of the house.	

Primary Caregiver's Signature:	Eldelin	0.	ANU
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Print Name: EREDULIN V. JULIAN

Date of Signature: 7/10/2019